

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: to be assigned Confirmation No.:
Applicant(s): Casses et al.
Filed: herewith
Art Unit:
Examiner:
Title: Retaining Device for an Improved Contact
Attorney Docket No.: 003D.0039.U1(US)
Customer No.: 29,683

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Information Disclosure Statement
(37 C.F.R. §1.97(b))

Sir:


The following information is being disclosed to the U.S. Patent and Trademark Office as information that may be material to the examination of the above-identified patent application.

Applicant's Attorney is aware of the documents listed on the enclosed Form PTO-1449. Copies of the non-US documents are enclosed with the Form PTO-1449 for the Examiner's use.

The filing of this Statement is not to be construed as a representation that a search has been made regarding the claimed invention (37 C.F.R. §1.97(g)) or that no other possible material information exists. In addition, the filing of this Statement is not to be construed to be an admission that the information cited in the Statement is, or

is considered to be, material to Patentability (37 C.F.R.
§1.97(h)).

Respectfully submitted,


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1/24/05
Date

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**INFORMATION DISCLOSURE
CITATION FORM FOR
PATENT APPLICATION
(FORM PTO-1449)
(Substitute)**

Docket No.: 003D.0039.U1(US)

Serial No.: to be assigned

60/522294

Applicant(s): Casses et al.

Filing Date: herewith

Group:

U.S. PATENT DOCUMENTS

Examiner Initials	Document Number (Number-Kind Code)	Publication Date (MM-DD-YYYY)	Name of Patentee or Applicant	Class	Sub-class
	US-5,190,476	03-02-1993	Chaillot	439	595
	US-5,746,624	05-05-1998	Ohsumi et al.	439	595
	US-4,969,841	11-13-1990	Sueyoshi et al.	439	595
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	US-				

FOREIGN PATENT DOCUMENTS

Examiner Initials	Document Number (Country Code-Number-Kind Code)	Publication Date (MM-DD-YYYY)	Name Of Patentee of Applicant	Translation? Yes/No/n/a
	FR 2 818 027	06-14-2002	Framatone Connectors International	No
	GB 1 281 009	07-12-1972	Matthews	
	GB 1 509 202	05-04-1978	Pemberton	
	- -			
	- -			
	- -			
	- -			

OTHER DOCUMENTS (Author (Capitalize), Title, Date, Pages, Etc., if known)

Examiner's Signature:

Date Considered:

Initial if reference was considered, whether or not citation is in conformance with MPEP. Mark through citation if not considered.
Include a copy of this citation form with your next correspondence to the Applicant(s).